Procedural Guide

0600-500.00

UTILIZATION OF MEDICAL HUBS

Date Issued: 07/17/12 Effective date 07/31/12 (NOTE: The effective date applies to only those sections highlighted in yellow, the rest of the procedures are currently in effect. This will allow time for SCSW to inform their CSWs of the changes.)
New Policy Release
Revision of Existing Procedural Guide 0600-500.00, Utilization of Medical Hubs, dated 11/03/10
Revision Made: NOTE: Current Revisions are Highlighted
At the request of the Bureau of the Medical Director this Procedural Guide has bee revised to reflect the release of FYIs 12-02, Automatic Transmission of the Medical Hub Referral Form to Childrens Hospital Los Angeles, 12-03, Requesting a Court Order for an Initial Medical Exam and 12-15, Notification of Revision of the 72 Hou Requirement for an Initial Medical Examination for Children 0-3 Years of Age and High Risk Children. In addition, other revisions have been made to reflect current policy and practice. Further, instructions were added regarding Intercounty transfe cases.
Cancels: FYIs 12-02 , Automatic Transmission of the Medical Hub Referral Form to Childrens Hospital Los Angeles, 12-03 , Requesting a Court Order for an Initial Medical Exam and 12-15 , Notification of Revision of the 72 Hour Requirement for an Initial Medical Examination for Children 0-3 Years of Age and High Risk Children

DEPARTMENTAL VALUES

This Procedural Guide supports the Department's efforts to ensure child safety and timely permanency (family reunification, adoption or legal guardianship) for children, with the number one permanency option of returning the child home and reducing the reliance on out-of-home care. The Medical Hub staff work in partnership with DCFS to ensure the safety, health and well-being of children under its care.

WHAT CASES ARE AFFECTED

This Procedural Guide is applicable to all new and existing referrals and cases (including inter-county transfer cases).

OPERATIONAL IMPACT

Under the leadership of DCFS, and in partnership with the Departments of Health Services and Mental Health, a countywide Medical Hub System was developed to create better outcomes for children by providing expert medical examinations and care. The seven Medical Hubs provide Initial Medical Examinations, forensic evaluations as needed and mental health screenings for DCFS-served children who are newly detained.

California law authorizes a medical examination (forensic evaluations) of a child who has been placed into protective custody under the following circumstances:

- 1. The child has been detained due to allegations of physical or sexual abuse; and
- 2. Prior to the examination, the CSW consulted with a medical provider who has specialized training in detecting and treating child abuse injures and neglect who has determined that a physical examination is appropriate; and
- 3. The examination is performed by a medical practitioner who has specialized training in detecting and treating child abuse injuries and neglect; and;
- 4. If the allegations are made while the child is in custody, the physical examination must be performed within 72 hours of the time the allegations were made; otherwise, whenever possible, the examination shall take place within 72 hours of the detention; or
- For a youth age 12 or older who consents to the examination, if sufficiently mature (see Family Code Section 6920).

However, federal appellate court cases prohibit investigative/evidentiary medical examinations (forensic evaluations) **unless one or more** of the following conditions exist:

- 1. Parental consent; or
- 2. A court order: or
- 3. Exigent circumstances which demonstrates either 1) a medical emergency (urgent problem requiring immediate medical attention); or 2) the examination is necessary to preserve evidence (e.g. child was a victim of sexual assault and evidence will likely be destroyed in the time it would take to get a warrant).

NOTE: Accordingly, **all** requests for investigative/evidentiary medical examinations where a parent or guardian has not voluntarily consented to the examination and exigent circumstances do not exist, should be made at a court hearing or in a warrant application. See Procedural Guide 0070-570.10, Obtaining a Search and/or Custody Warrant.

Further, the Ninth Circuit Court of Appeals has recently held that government officials cannot exclude parents entirely from the location of their child's physical examination absent parental consent, or some legitimate basis for exclusion, or an emergency

requiring immediate medical attention. Thus, a family's right to be with each other during potentially traumatic medical examinations may be limited in certain circumstances to presence nearby the examinations (in the waiting room or another nearby area) only if there is some "valid reason" to exclude the family members from the exam room during a medical procedure. Thus, if a CSW determines the need to exclude a parent or guardian from a medical examination — even if that medical examination was ordered by the court — the CSW should consult with his/her SCSW for guidance. The SCSW will consult with the Warrant Liaison or County Counsel, as necessary.

NOTE: If authorities (CSW, law enforcement, etc.) have reasonable evidence that a parent is abusive, cannot provide love and support to the child, or will in some significant way interfere with the examination, the parent may be directed to a nearby waiting room. A parent should be banned from the facility in situations where the parent would be highly disruptive.

State-regulations require a medical examination for **all** children placed in out-of-home care. The Initial Medical Examination is conducted within 10 days of initial placement following detention for high risk children and children 0-3 years of age. Further, per state regulations, all other children are to have their Initial Medical Examination within the first 30 days of initial placement following detention.

Likewise if a child has not been taken into temporary custody and a forensic specialist deems it appropriate, parental consent, a warrant or exigent circumstances, is required. See Procedural Guide 0070-570.10, Obtaining a Search and/or Custody Warrant.

The mandatory use of the Medical Hubs **does not** apply to children placed out of Los Angeles County. However, if a caregiver who resides out-of-County is willing to travel to a Medical Hub, the Hubs are available to serve the DCFS child. Further, if the child subsequently is placed in out-of-home care in Los Angeles County, the child should be taken for an Initial Medical Exam at a Medical Hub.

The Medical Hub Program focuses on serving the following three populations:

- 1. Newly-detained children placed in out-of-home care. This population is defined as children who first, or initially, enter the child welfare system and are placed in out-of-home care under a WIC 300 petition. (This definition includes children in an open case under a Court FM or VFM case plan who are subsequently removed from their biological parents and placed in out-of-home care). For newly detained children, the Initial Medical Examination is to be provided at a Medical Hub; (Note: Newly detained children placed out of Los Angeles County are excluded)
- 2. Children who are in need of a forensic evaluation to determine abuse and/or neglect, and under DCFS referral or case status;

3. Children with special medical conditions, i.e. diabetes, hemophilia, etc.

See Procedural Guides 0070-548.20, Taking Children Into Temporary Custody and 0070-570.10, Obtaining Search Warrants and/or Removal Orders.

Additional populations will be served based on existing capacity at each Medical Hub. Examples of an additional population are children who have been removed from one parent and placed with another under Court FM or VFM with no specific medical condition and those children who are currently suitably placed.

The caregiver who is most knowledgeable of the child's health status should accompany the child to the Hub. Simultaneously the caregiver is advised to take the HEP to the Hub appointment for review by the Hub physician if it applies when examining the child.

The chart below highlights which DCFS offices are geographically located to the nearest Medical Hub. However, the child shall be referred to the Hub closest to where the child's placement is located (e.g., a child served by the DCFS Torrance Office may be placed closer to the Martin Luther King, Jr. Multi-Service Ambulatory Care Center and would go there instead of the Harbor-UCLA Medical Center Hub).

MEDICAL HUBS

Medical Hubs	SPA	DCFS Offices
High Desert Health System	1	PalmdaleLancaster
Olive View-UCLA Medical Center	2	 San Fernando Valley Office Santa Clarita West San Fernando Valley (Santa Clarita Satellite Office)
LAC+USC Medical Center • SCAN Clinic Community Assessment and Treatment Center	3, 4 & 7	ERCPPasadenaMetro NorthBelvedereSanta Fe Springs
Children's Hospital Los Angeles * • Foster Care Clinic • Forensic	5 & 2	 West Los Angeles San Fernando Valley Office West San Fernando Valley (Santa Clarita Satellite Office)
LAC+USC East San Gabriel Valley Satellite	3	PomonaGlendoraEl Monte

Medical Hubs	SPA	DCFS Offices
Martin Luther King, Jr. Multi-Service Ambulatory Care Center	6 & 7	 Compton Project Compton West Vermont Corridor Wateridge Santa Fe Springs Wateridge Torrance Satellite
Harbor-UCLA Medical Center • Children's Crisis Center • KIDS Clinic	8	LakewoodTorrance

^{*}Although Children's Hospital Los Angeles (CHLA) is a non-public entity, it is operational to provide services to DCFS-supervised children.

Core Services Available at the Medical Hubs

NOTE: CSWs are encouraged to seek the expertise that is available at the Medical Hubs. However, the results of the examination, including the forensic

evaluation, are one of various tools that are to be utilized in case planning.

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Any child with severe or life threatening injuries should be seen at an emergency care facility or trauma center. The child with severe injuries should be referred to a Medical Hub after his/her injuries have been stabilized.

Initial Medical Examination

The Initial Medical Examination is routine and preventive, and it is the first of the periodic medical exams that must occur when a child is initially placed under DCFS supervision. It is the responsibility of the caregiver to transport the child to this exam. See Medical Hub Notice to Caregiver.

The Initial Medical Examination consists of the following components:

- Review of the health history (whenever available)
- Physical examination
- Forensic screening—(to determine if an expert forensic evaluation is needed)
- Measurements such as height, weight, Body Mass Index (BMI), and blood pressure
- Nutritional assessment
- Dental screening
- Developmental screening (may be deferred to follow-up appointment in the Hub)
- · Vision and hearing testing

- Laboratory screening tests
- Immunizations
- Appropriate health education
- Age-appropriate brief mental health screening (refer to page 6)

NOTE: The Initial Medical Examination IS NOT required when a child is being replaced from one placement to another within Los Angeles County. Rather, he CHDP Periodicity Schedule should be adhered to when implementing health examinations of the child.

The MAT Coordinator and Service Linkage Specialist will serve as the central coordinating point of the CSAT process and will receive and track results of the Initial Medical Examination received from the Hub, including the date of the initial examination and the Child Welfare Mental Health Screening Tool (CWMHST).

Forensic Evaluation

A forensic evaluation is not required for all DCFS children, and should be obtained only as permitted by California and federal law as described above.

If appropriate, and only after obtaining consent or a warrant if exigent circumstances do not exist, the local law enforcement agency or child welfare agency shall cause the child to undergo a physical examination performed by a medical practitioner who has specialized training in detecting and treating child abuse injuries and, whenever possible, shall ensure that this examination takes place within 72 hours of the time the child was taken into protective custody.

Accordingly, requests for investigative/evidentiary medical examinations where exigent circumstances do not exist, should be made at a court hearing or in a warrant application. See Procedural Guide 0070-570.10, Obtaining a Search and/or Custody Warrant.

NOTE: If authorities (CSW, law enforcement, etc.) have reasonable evidence that a parent is abusive, cannot provide love and support to the child, or will in some significant way interfere with the examination, the parent may be directed to a nearby waiting room. A parent should be banned from the facility in situations where the parent would be highly disruptive.

Thus, a family's right to be with each other during potentially traumatic medical examinations may be limited in certain circumstances to presence nearby the examinations (in the waiting room or another nearby area) only if there is some "valid"

<u>reason</u>" to exclude the family members from the exam room during a medical procedure.

Medical Hub personnel/providers are experts in child abuse and neglect and fulfill the aforementioned requirements of a medical practitioner who has specialized training in detecting and treating child abuse and neglect, to determine whether a physical examination of the child is appropriate. Therefore, when there are allegations of physical or sexual abuse, after obtaining consent or a warrant if exigent circumstances do not exist, the CSW should request that a forensic evaluation be conducted on the child at a countywide Medical Hub. Medical Hub personnel/providers will review the request for a forensic evaluation following the submission of the Hub Referral Form and a phone call from the CSW, and will direct the CSW on the appropriateness of a forensic evaluation, and the timeframe for the child to be seen for the evaluation. The review and direction given by the Hub physician may include use of a non-physician Hub liaison, who will bring the Hub Referral Form to the Hub's physician attention and serve as the intermediary between the CSW and the physician in terms of obtaining clarification of the information presented on the Referral Form or requesting additional information from the CSW, and responding to the physician. In addition, the Liaison also may share with the CSW the physician's direction, rather than the physician directly speaking with the CSW. See Procedural Guides 0070-529.10, Assessment of Physical Abuse, and 0070-532.10, Assessment of Sexual Abuse.

The DHS Medical Hubs require DCFS referrals for forensic medical examinations to be submitted electronically through the E-mhub System and to be followed up by the referring CSW with a telephone call to the Medical Hub for consultation and intake.

Referrals for forensic evaluations meeting the following criteria will be accepted and scheduled by the Medical Hubs, regardless of other case circumstances:

- 1. All children who are alleged victims of child abuse or neglect and are under the age of five, OR are non-verbal, OR have been unable/unwilling to communicate with the CSW about allegation(s).
- 2. Any case in which the referring CSW communicates to Medical Hub intake staff that he or she feels the child should be seen; and,
- 3. Any child for whom a detention decision is being made based on a current physical finding, but an examination or consultation by a trained forensic examiner has not occurred. In these cases, an immediate (same day or next day) appointment will be scheduled, and the CSW will be requested to accompany the child. If an appointment is not available at that Medical Hub, the child will be referred to another Medical Hub with availability.

If a child has received a forensic examination at a facility other than a Medical Hub, the CSW should consult with the Medical Hub to determine whether a Medical Hub examination is needed.

For siblings or other children who live in the same home and/or have contact with the alleged perpetrator (sometimes referred to as "companion cases"), the Medical Hubs will request that the CSW provide complete information at intake from the CSW's interview of each child. In cases where the alleged victim child is under the age of five or non-verbal, the Medical Hub may request that older siblings or companion cases accompany the alleged victim child to the Medical Hub, to assist in providing history. In some cases, the alleged victim child may be examined first and the other children may not require a full forensic evaluation

The Medical Hubs will request that DCFS provide all pertinent medical records and case information. If the requested information is not immediately available, the forensic exam will not be delayed in cases where there is an immediate concern for the child's safety or for the observation of physical evidence. In these cases, however, the forensic examiner may wait to issue written findings to DCFS until the requested records and/or information are received. The Medical Hub will inform the CSW as to what items are missing and are required before the examiner can issue a report.

The forensic evaluation will vary by the presenting concerns and may include the following:

- Physical examination and clinical assessments to determine presence and extent of any injuries or signs of neglect;
- Provision of clinical care for all injuries and effects of neglect, including old injuries that may not be clinically obvious, and initiation of appropriate treatment;
- Evidence collection, including evidence of sexual assault, sexually transmitted diseases, and photo documentation of all injuries (including sexual assault injuries);
- Interpretation of physical findings regarding the likelihood that they are the result of abuse or neglect; and
- Forensic interview, if needed (Please note that forensic interviews are not conducted at all Hubs).

Age-Appropriate Mental Health Screening

Each Medical Hub will complete an age-appropriate mental health screening, through use of the Child Welfare Mental Health Screening Tools (CWMHST), (i.e., for Child 0 to 5, or for Child 5 to Adult). The Tool is used to identify the need for a more comprehensive mental health assessment.

Other Services Available at the Medical Hubs

Reminder: Requests for these services will be screened by the Hub for a timely response.

Second Opinion

A Second Opinion is most often requested in a situation when a previous examination for child physical or sexual abuse has been conducted by a local community hospital, including an emergency care facility or a community provider, and the examination was not completed by a child abuse specialist. Second opinions cannot be completed without providing the Medical Hub with full medical records, including x-rays.

Other Services including Court Ordered

In addition to providing the Core Services, the Medical Hubs provide varying degrees of expertise and capacity to address the unique needs of children, such as weight management issues, screening and treatment for Fetal Alcohol Spectrum Disorder, and/or subspecialty services such as Neurology and Cardiology. For those children/youth whose BMI is not in the normal range, some Hubs are available to develop a Healthy Lifestyle Plan with the child/youth and the caregiver to address this issue. The availability of these specialty services at a Medical Hub becomes very useful when the Court makes an order for the child to receive a specialty service. In addition, the Hubs are available to asses the need for the child to receive subspecialty services. See Procedural Guides; 0070-524.10, Assessment of Failure to Thrive, 0070-525.10, Assessment of Shaken Baby Syndrome, 0070526.10, Assessment of Fetal Alcohol Syndrome(FAS), and 0070-516.15, Screening and Assessing Children for Mental Health Services and Referral to the Coordinated Services Team (CSAT). The Juvenile Court may order a special examination or service to be completed by a Medical Hub towards addressing a health or health-related concern that has become

Medical Hub towards addressing a health or health-related concern that has become known to the Court. Under most circumstances, the Court will order that the results of the examination or service be provided back to the Court.

After Hours Services

Staffing at the Medical Hubs during after hours is limited to the LAC+USC Medical Center SCAN Clinic. When contacting the SCAN Clinic after hours, procedures outlined in this Procedural Guide are to be followed. However, because of the reduced staffing during the after-hours time period (5: 00 P. M–8:00 A. M., Monday through Friday, er and on weekends and holidays), there may be a delay in the immediate scheduling of an appointment. Should the CSW encounter this problem and the child has a medical emergency, the CSW should follow the standard procedure of getting the child to an emergency care facility.

Additionally, if the CSW is seeking and cannot get an immediate non-emergent medical appointment, the CSW should not delay the process of detaining the child. Standard procedures should be followed as outlined in Procedural Guides 0070-529.10, Assessing Allegations of Physical Abuse, Procedural Guide 0007-548.20, Taking Children into Temporary Custody and Procedural Guide 0300-303.15, Writing the Detention Report.

NOTE: CSWs should encourage caregivers, to the extent possible, to take only the child who is being examined at the Medical Hub to the appointment, and make arrangements for other children for whom the caregiver has responsibility to be supervised. The Medical Hubs do not have the capacity to provide child care. When caregivers are required to take more than one child to the Hub for multiple appointments, the CSWs should encourage the caregivers to take another adult to assist with the supervision of the other children in the waiting room as each child has their exam.

For children who are being referred to a Medical Hub for an exam after being discharged from a Hub-affiliated hospital, the child should be referred to that Hub whenever possible. In addition, when referring a child to a Medical Hub for an exam, if the child had been served prior at a Hub-affiliated Emergency Room where the question of child abuse was raised, the child should be referred to that Hub whenever possible. This direction strengthens care coordination efforts and increases the availability that the medical records on the child.

Extended Care (E-Care) Clinic Hours for LAC+USC Hub

Wednesday to Friday 5:30 PM – 9:30 PM Saturdays 10:00 AM-3:30 PM

Services provided:

- Sick visits
- Medical clearances
- Increased capacity to deal with forensic exams of children with acute marks and bruises
- Walk-in patients will be accepted but it is preferred that the CSW call in advance.

E-mHub System

E-mHub is a web-based system used by the DHS Medical Hubs that tracks the health status of children in the child welfare system and facilitates provision of quality medical care. As part of a joint effort between DHS and DCFS, the E-mHub System accepts the electronic transmission of the DCFS Medical Hub Referral Form and returns appointment status alerts and completed examination forms, to DCFS via an e-mail notification. DCFS and DPH PHNs and PHN Supervisors have access rights to E-mHub screens pertaining to the health care of children served at the Hubs. Completed examination forms may be accessed through the link in the email notification by using the SITE User ID (employee number) and Password (current password used by employee).

NOTE: For security reasons, the link to the forms in e mail notifications is only available to DCFS staff for 10 business days from the date of the e-mail.

When DCFS receives an appointment status notification or link to an examination form from E-mHub, CWS/CMS is automatically searched to obtain the currently assigned CSW and SCSW, and an email is routed to staff as follows:

- 561(a) forms: Email link sent to currently assigned CSW, SCSW, PHN, PHN Supervisor and respective CSAT staff.
- CalEMA forms: Email link sent to the currently assigned CSW and SCSW.
- CWMHST forms: Email link sent to the currently assigned CSW, SCSW and respective CSAT staff.
- "Negative" appointment status notifications (e.g., No Show, Canceled, Rescheduled, To Be Rescheduled, Referred Out, Incomplete, Returning Referral): Email notification sent to currently assigned CSW and SCSW.
- "Positive" appointment status notifications (e.g., Scheduled, Showed Up): received by DCFS BIS for inclusion in tracking reports but not forwarded individually to staff, so as not to overwhelm email inboxes.

Automatic Transmission of the Medical Hub Referral Form to Childrens Hospital Los Angeles

DCFS has implemented the capability for the submission of the Medical Hub Referral Form automatically to CHLA by utilizing the Rightfax feature. This feature eliminates the need for CSWs to manually fax the Medical Hub Referral Form to CHLA.

Upon completion of a Medical Hub Referral Form, a CSW should press the same "SUBMITtoEmHub" button currently used to submit the Referral Form to the E-mHub System. The Form will automatically be faxed to the CHLA Hub.

The Rightfax feature does not provide electronic appointment status notifications to the staff, and the medical examination results will continue to be manually faxed to DCFS by the CHLA Hub.

Out-stationed CSWs and PHN at Medical Hubs

Based on funding from the Title IVE Capped Allocation Demonstration Project, DCFS CSWs are out-stationed at the seven Medical Hubs, including after hours at the 24/7 LAC+USC Medical Center Hub, to serve a pilot program. The goal is for these staff, performing complementary roles, to contribute to the efficiency of DCFS making referrals to the Hubs, the

work flow/operations of the Hubs and the required follow up/care coordination once the child is served by the Hub. Additional information will be provided to DCFS staff on the out-stationed PHNs as soon as it becomes available.

Listing of out-stationed CSWs at the seven Medical Hubs

http://lakids.dcfs.lacounty.gov/bmd/Health_Mental%20Health/SectionRosterChildWelfareHealthServices.pdf

Procedures

A. WHEN: A CHILD IS DETAINED

Initial Medical Examinations are to be conducted, within 10 calendar days of initial placement following detention for high risk children and children 0-3 years of age; all other children are to have their Initial Medical Examination within 30 calendar days of the child's detention and initial placement. See DCFS 561(a), Medical Examination Form-Instructions, DCFS 561(b), Dental Examination Form-Instructions, and DCFS 561(c), Psychological/Other Examination Form-instructions. For newly detained children, the Initial Medical Examination is to be provided at a Medical Hub. See Procedural Guide 0070-570.10, Obtaining Search Warrants and/or Removal Orders. For cases regarding children aged 0-36 months who are involved with a substantiated case of child abuse or neglect, see Procedural Guide 0070-548.15, Referring Children 0-36 Months Who Are Involved in a Substantiated Referral to Regional Center for an Assessment.

NOTE:

A high risk child is a child with one or more of the following conditions: a past significant medical problem or chronic illness; possible contagious disease; medication and/or social problems (e.g., language barrier) which could conceal an unmet medical need.

Infants who are discharged directly from the hospital and placed in out-of-home care may have a follow up appointment scheduled within two weeks from the initial placement in out-of-home-care, unless otherwise directed by hospital discharge instructions. If you believe the child's medical condition requires an expedited appointment rather than the standard timeframe listed above, specify the reason(s) why on the Hub Referral Form in the "Specify Reason for DCFS Current and Prior involvement" field, and call the Hub to discuss the request after submitting the Hub referral form.

In cases where there are allegations of physical or sexual abuse, a forensic evaluation should immediately be requested and should take place within 72 hours of placement, whenever possible. A forensic evaluation does not eliminate the need for an Initial Medical Exam. See Page 5-6 of this Procedural Guide.

NOTE:

Any child with severe or life threatening injuries should be seen at an emergency care facility or trauma center. The child with severe injuries should be referred to the Hub after his/her injuries have been stabilized.

CSW Responsibilities (who took the child into temporary custody, including an ERCP CSW)

- 1. Complete and submit the Medical Hub Referral Form to the Medical Hub that is in closest proximity to the caregiver's home. CSWs should not solicit the use of other Medical Hubs based on the clinical response from the Medical Hub staff. If needed, PHNs are available to consult with CSWs on the completion of the Medical Hub Referral form. The Medical Hub Referral Form is submitted electronically by way of the E-mHub System to all Hubs with the exception of CHLA which utilizes the Rightfax feature. CSWs are to contact the Helpdesk when encountering any problem in submitting the Medical Hub Referral Form through the E-mHub System or Rightfax feature.
- 2. At the time of initial placement, inform the caregiver of the new-requirement to utilize the Medical Hubs. This includes identifying the Medical Hub that the caregiver will be taking the child to, the reason for the Referral (i.e., service to be provided) and the timeframe for the delivery of the service. Review and complete the Medical Hub Notice to Caregiver with the caregiver, and have the caregiver initial and sign the form in the designated spaces.
- 3. Instruct the caregiver to contact the Medical Hub closest to her/his home, within the designated timeframe for the submission of the Medical Hub Referral Form (see below), or the estimated timeframe when the Referral will be submitted to the Medical Hub. Note: The timeframe given to the caregiver to contact the Hub should be adhered, to since the Medical Hub staff is not available to provide an appointment for a child to be seen until the Medical Hub Referral Form is submitted.

NOTE: CSWs are to remind caregivers to take the DCFS 4158/Authorization for General Medical Care for a Child Placed by an Order of the Juvenile Court or the DCFS 179 Parental Consent and Authorization for Medical Care with them to the Hub appointment along with proper identification. CSWs should inform the Medical Hub Personnel if any other relative/person besides the main caregiver (whose name appears on the DCFS 4158/179 form) is to take child to the medical appointment. It should be noted that children may be turned away if anyone besides the main caregiver brings the child to the Hub and the relationship of that person to the child is not confirmed.

4. Notify the caregiver that examinations at Medical Hubs are comprehensive. Therefore, the exams can be lengthier than the routine exams conducted by a community health provider. NOTE: The Medical Hub Notice to Caregiver is automatically included in the Placement and Replacement Packets. However, it is not mandatory for children who are replaced to go to a Medical Hub for services. Therefore, CSWs are to put the Medical Hub Notice to Caregiver aside when reviewing a Replacement Packet with a child's new caregiver, since there is not a need for the child to go to a Hub.

- 5. When requesting an Initial Medical Examination for infants/children under 3 years of age, or a High Risk child, complete and submit the Medical Hub Referral Form by way of E-mHub System to all Hubs with the exception of CHLA which utilizes the Rightfax feature, within three calendar days of the child's initial placement. For children above 3 years of age, complete and submit the Medical Hub Referral Form within five business days of the child's initial placement.
- 6. When requesting a forensic evaluation for a child of any age, complete and submit the Hub Referral Form by way of E-mHub System to all Hubs with the exception of CHLA which utilizes the Rightfax feature to the Medical Hub that is in closest proximity to the caregiver's home. In addition, after the Hub Referral Form has been submitted, telephone the Medical Hub to verify receipt of the document and provide clarifying or additional information on the child being referred. Receive direction from the Hub's physician on the appropriateness of, and the timeframe for, a forensic evaluation. Subsequently, proceed to implement the direction provided by the Medical Hub.
 - a) Determine the appropriateness of the parent being present for the forensic exam.

NOTE: CSWs cannot exclude parents entirely from the location of their child's forensic examination absent parental consent, some legitimate basis for exclusion, or an emergency requiring immediate medical attention. Thus, a family's right to be with each other during potentially traumatic medical examinations may be limited in certain circumstances to presence nearby the examinations (in the waiting room or another nearby area) only if there is some "valid reason" to exclude the family members from the exam room during a medical procedure. Thus, if a CSW determines the need to exclude a parent or guardian from a medical examination — even if that medical examination was ordered by a court — the CSW should contact their SCSW for guidance. The SCSW will consult with the Warrant Liaison or County Counsel, as necessary.

If authorities (CSW, law enforcement, etc.) have reasonable evidence that a parent is abusive, cannot provide love and support to the child, or will in some significant way interfere with the examination, the parent may be directed to a nearby waiting room. A parent should be banned from the facility in situations where the parent would be highly

disruptive.

Thus, a family's right to be with each other during potentially traumatic medical examinations may be limited in certain circumstances to presence nearby the examinations (in the waiting room or another nearby area) only if there is some "valid reason" to exclude the family members from the exam room during a medical procedure.

Reminder: Any consultation with Medical Hub staff can be made only after the submission of the Medical Hub Referral Form.

- b) During the consultation with the Medical Hub personnel regarding the appropriateness of forensic evaluation, inform the Medical Hub personnel if there is a "valid reason" to exclude the family members from the exam room during a medical procedure.
- c) Inform the parent of as to whether or not they may be present during the exam and if there are any limitations to their presence during the exam.

NOTE: The Medical Hub Referral Form is a template on CWS/CMS, and certain fields will self-populate. CSWs are to document the reason for DCFS' current involvement and prior involvement, along with providing detailed information, including specific concerns they have. The information provided to the Medical Hubs in this section of the Referral Form is essential to the Hub staff verifying/determining the service that is required to most effectively serve the child, including the timeframe for delivering the service.

- 7. When requesting a **Second Opinion** on a child of any age, after consultation with SCSW, complete and submit the Medical Hub Referral Form by way of E-mHub System to all Hubs with the exception of CHLA which utilizes the Rightfax feature, to the Medical Hub that is in closest proximity to the caregiver's home. In addition, after submitting the Medical Hub Referral Form through the E-mHub System or by Rightfax, telephone the Medical Hub to receive direction from the Hub's physician, on the appropriateness of a Second Opinion. Include all documentation related to the first exam. It is incumbent upon the CSW (or the PHN who may communicate to the CSW), to communicate to the Hub the reason why it is urgent to conduct the second opinion.
- 8. When requesting any other services, including Court Ordered Service for a child of any age, contact the Medical Hub to ensure that it is available and/or medically advisable before completing the Medical Hub Referral Form. Complete and submit, the Medical Hub Referral Form (after contacting the Hub), by way of the E-mHub System to all Hubs with the exception of CHLA which utilizes the Rightfax feature, to the Hub that is closest to the caregiver's home.

NOTE: CSWs are reminded that if the caregiver is given an appointment at a Hub, but the child can be seen at another Hub sooner than the appointment that was made at the first Hub, the first Hub must be contacted to cancel the appointment. This step is required to free up space/availability for another child to be served at the Hub where the original appointment was made. Please do not duplicate appointments at multiple Hubs.

- 9. If the child is placed in a Foster Family Agency (FFA) or group home, contact the social worker or group home representative with the instructions/requirements for making an appointment and utilizing the Medical Hub closest to the child's placement. Make the social worker or group home representative aware of the time-frame in which the child is to be seen.
- 10. Fax the Medical Hub Referral Form to the FFA social worker or group home representative within one business day of the submission of the referral through E-mHub or the Rightfax feature.
- 11. Maintain regular contact with the FFA social worker or group home representative and request periodic written progress reports.
- 12. Document all contacts with the FFA social worker or group home representative and with all service providers, in the Contact Notebook.
- 13. Include the following recommendation in the Detention Report:

It is respectfully recommended that the court make the following order: "DCFS is hereby ordered to obtain Medical Hub medical services for the child(ren) (enter child's name). DCFS shall submit the referral form to the appropriate Medical Hub as soon as possible to initiate services in a timely manner. Services shall include, but are not limited to, initial medical evaluation, mental health screening, and dental screening along with required follow up and ongoing routine medical care provided by the Medical Hub, or other community medical, mental health, and dental providers. The Court orders the release of any and all medical records in DCFS' possession regarding the child[ren] (enter child's name) to the Medical Hub provider for the coordination of care and treatment of the child[ren] (enter child's name) as specified in this order unless release by DCFS is otherwise prohibited by law. Information regarding the Medical Hub services and any report prepared by the Medical Hub or other medical provider shall be provided to DCFS for the coordination of care, treatment, and supervision of the child. Such information shall not include the details of therapeutic sessions or statements made by the child[ren] unless there is a legally permissible basis to do so. Further, pursuant to Welfare and Institutions Code Sections 5328.04 and Civil Code Section 56.103 information disclosed pursuant to this order may not be admitted into evidence in any criminal or delinguency proceeding against the child. Nothing in this section

shall prohibit identical evidence derived solely from other lawful means from being admissible in a criminal proceeding nor is intended to prohibit a health care provider from providing care to a minor or disclosing health information about a minor to DCFS if there is a legally permissible basis to do so."

"DCFS is to regularly update this Court and all parties to this case, and their legal counsel, regarding the status of the Medical Hub assessment and follow-up care and treatment provided."

B. WHEN: A CHILD IS NOT DETAINED

The Medical Hubs are available to provide a forensic evaluation on a child who is not detained. Since the child is not under DCFS supervision and care, **parental consent is required**. Furthermore, it may be most appropriate for the parent, or primary caregiver that has responsibility for the child, to take the child to the Medical Hub for the service. It is incumbent upon the CSW to communicate to the Hub the reasons why it is urgent for the child to be seen.

NOTE: Any child with severe or life threatening injuries should be seen at an emergency care facility or trauma center. The child with severe injuries should be referred to a Medical Hub after his/her injuries have been stabilized.

CSW Responsibilities (the CSW conducting the ER investigation, including the ERCP CSW)

NOTE: PHNs are available to consult with CSW on the completion of the Medical Hub Referral form. However, it is the CSW's responsibility to submit the Medical Hub Referral Form by way of the E-mHub System to all Hubs with the exception of CHLA which utilizes the Rightfax feature, to the Hub that is closest to the caregiver's home.

If the child has been detained, complete the Medical Hub Referral Form for a forensic evaluation. Follow the same CSW procedure as described in Section A. 5-12. Upon submission of the Referral Form, a Medical Hub Referral Receipt notification is received (with the exception of CHLA) to verify that the transmission was successfully transmitted to the E-mHub System; if the Receipt notification is not received, the submission was not successfully sent.

Reminder: In order to view the Pop-up Receipt on the computer screen, no more than 3 work windows can be open at same time. If there are more than 3 windows open staff will not be able to view the Pop-up Receipt.

NOTE: The Medical Hub Referral Form is a template on CWS/CMS, and certain fields will self-populate. CSWs are to document the reason for DCFS' current involvement and prior involvement, along with providing detailed information, including specific concerns they have. The information provided to the Medical Hubs in this section of the Referral Form is essential to the Hub staff verifying/determining the service that is required to most effectively serve the child, including the timeframe for delivering the service.

2. Contact the Medical Hub to obtain direction from the Hub physician on the appropriateness of the forensic evaluation, including the time frame, and the most appropriate individual to accompany the child to the Hub.

Reminder: Any consultation with Medical Hub staff can only be made only after the submission of the Medical Hub Referral Form.

NOTE: When utilizing a Medical Hub for a child who is not detained, the Medical Hub that is closest to the parent's or primary caregiver's home should be selected.

- 3. Proceed according to the direction received from the Medical Hubs.
- 4. Document all contacts and actions taken, in the Contact Notebook.

C. WHEN: ASSIGNMENT OF AN INTERCOUNTY CASE

It is DCFS policy that, within 30 days of being assigned an inter-county transfer case (including FM, FR, PP cases), the CSW shall review the case record jointly with the PHN to determine if there is a medical need to have the child(ren) seen by the nearest Medical Hub for an Initial Medical Examination. On the Medical Hub Referral Form, note that this is an inter-county transfer case in the "Specify reason for DCFS current and prior involvement "field. Provide copies of any medical records contained in the case file to the Medical Hub personnel on or before the date of the examination. See Procedural Guide 1000-504.75, Intercounty Transfer (ICT).

Continuing Services CSW Responsibilities

Follow CSW (who took the child into temporary custody) steps 1-5 and 9-12 in Part
 A of this Procedural Guide

D. WHEN: APPOINTMENT NOTIFICATION IS RECEIVED FROM THE E-MHUB SYSTEM

Once the Medical Hub Referral has been electronically submitted through the E-mHub System and the Medical Hub staff attempt to process the referral, an e mail notification will be sent to DCFS to apprise the CSW and SCSW if there are any problems with the referral or appointment.

In some cases the Medical Hub staff may return a Medical Hub Referral Form to the CSW to request additional information or report that they were unable to schedule the appointment. The Medical Hub staff will select one of the reasons below and may also write a message to the CSW with details and specific instructions. CSWs must carry out the instruction(s) presented by the Medical Hub in the e-mail notification. The reasons for return are:

- Insufficient Information. Please correct and resubmit;
- Unable to Schedule Appointment;
- Requested service not available at this Hub;
- Phone consult; no appointment needed at this time;
- Duplicate appointment for similar service already made at a Hub;
- Child's Parent Declined Exam

When a Medical Hub Referral is returned to DCFS, the referral is removed from the Medical Hub's referral queue and the Medical Hub staff will no longer work on the referral. To reinitiate the referral, the CSW should either re-submit the referral form or call the Medical Hub. If any information has changed since the time of the original referral, a new form should be submitted.

E-mHub notifications of the following "negative" appointment statuses are also sent via email to the currently assigned CSW and SCSW:

- No Show
- Canceled (will indicate if initiated by caregiver, Hub, DCFS or Other)
- Rescheduled (will indicate if initiated by caregiver, Hub, DCFS or Other)
- To Be Rescheduled (will indicate if initiated by caregiver, Hub, DCFS or Other)
- Referred Out
- Incomplete

CSWs are to follow up with parent/primary caregiver or out-of-home caregiver within three calendar days on no show notifications to ensure that the forensic evaluation or Initial Medical Examination, or other medical appointment is rescheduled.

NOTE: Once the Medical Hub Referral has been electronically submitted through the E-mHub System and the Medical Hub staff attempt to process the referral, an e-mail notification will be sent to apprise the CSW and SCSW if there are any problems with the referral or appointment. In some cases, the Medical Hub staff may return a Medical Hub Referral Form to the CSW to request additional information or report that they were unable to schedule the appointment. The Medical Hub staff will select one of the reasons below and may also write a message to the CSW with details and specific instructions. CSWs should implement the instruction presented by the Medical Hub in the email notification. The reasons for return are:

- Insufficient Information; Please correct and re-submit;
- Unable to Schedule Appointment;
- Requested services not available at this Hub;
- Phone Consult; No appointment needed at this time;
- Duplicate. Appointment for similar service already made at a Hub;
- Child's Parent Declined Exam.

E. WHEN: EXAMINATION RESULTS ARE RECEIVED FROM THE MEDICAL HUB

The results of the Initial Medical Examination, and any forensic evaluation, along with the CWMHST and other ancillary documentation, the latter from some of the Medical Hubs, will be provided to the assigned CSW, as follows:

- 561(a) forms: Email link sent to currently assigned CSW, SCSW, PHN, PHN Supervisor and respective CSAT staff.
- CalEMA forms: Email link sent to the currently assigned CSW and SCSW.
- CWMHST forms: Email link sent to the currently assigned CSW, SCSW and respective CSAT staff.

Access is available using the SITE User ID (employee number) and Password (current password used by employee).

NOTE: For security reasons, the link to the forms in the e-mail notifications is only available to DCFS staff for 10 business days from the date of the e-mail.

For the Childrens Hospital Los Angeles (CHLA) Hub medical examination results will continue to be manually faxed to DCFS by the CHLA Hub.

Reminder: CSWs are to attach the results of the 561 (a), Initial Medical Hub Examination, to the court reports (i.e., Status Review Report).

Regional Designated Staff Responsibilities (for CHLA referrals only)

- 1. Receive the documents faxed by the CHLA to the designated fax machine in the DCFS SPA office:
 - a) Search and identify current CSW and SCSW and record on DCFS 561 (a) and on CWMHST;
- 2. Provide SCSW/CSW with CalEMA form;
- 3. Make three copies of DCFS 561(a) for SCSW/CSW, PHN, DMH and CSAT in-box.

CSAT Staff Responsibilities

 Upon the receipt of the Initial Medical Examination or any urgent CWMHST from the Medical Hub, review the 561(a) and the CWMHST and determine whether a referral to Co-located DMH staff is needed. If a referral is needed, CSAT staff will work with the CSW to ensure the required DCFS 174 is completed and a referral is submitted to Co-located DMH staff for further assessment and linkage to services

CSW Responsibilities

- 1. Review all information on the medical examination, [561(a)], CalEMA (Formerly known at the OES forms), and CWMHST screen, and consult with SLS, PHN, colocated DMH staff, and with co-located Educational Liaison (if educational needs have been identified) to ensure appropriateness of follow-up care.
 - a) Print out a copy of the 561(a), CalEMA, and CWMHST screen and file them in the Psychological/Medical/ Dental/School Report Folder.
- 2. Fax the completed 561a) to FFA and/or group home representative within five business days of receipt.
- 3. Document all contacts with the caregiver, Hub staff, SLS, PHN, DMH co-located staff etc., in the Contact Notebook.

NOTE: For security reasons, the link to the forms in the e-mail notifications is only available to DCFS staff for 10 business days from the date of the e-mail. For Children's Hospital of Los Angeles (CHLA) Hub medical examination results will continue to be manually faxed to DCFS by the CHLA Hub. For a list of designated staff to receive these faxes and the designated office fax numbers and click here:

http://lakids.dcfs.lacounty.gov/bmd/documents/Designated_FAX_Lines_for_DCFS_Offices.pdf

PHN Responsibilities

1. Review medical examination form, and if applicable the CalEMA, and enter the results into CWS/CMS and follow-up with health concerns as indicated on the form(s).

DMH Co located staff function

DMH staff co-located in the DCFS offices are the primary resource to triage, assess and link children and families to mental health services. The DMH Specialized Foster Care (SFC) supervisor (or their designee) is the primary point of contact for mental health issues; they review the Child Welfare Mental Health Screening Tool (CWMHST) received from the Hubs, follow up on positive on positive CWMHST findings, assign cases to clinicians within the program and oversee tracking of the case disposition. Additional protocols and guidelines for the DMH staff are delineated in the DMH Specialized Foster Care Manual.

APPROVAL LEVELS

Section	Level	Approval
A <mark>E</mark> .	None	

LINKS

California Code
Division 31 Regulations
Title 22 Regulations

http://www.leginfo.ca.gov/calaw.html http://www.cdss.ca.gov/ord/PG309.htm http://www.dss.cahwnet.gov/ord/PG295.htm

OVERVIEW OF STATUTES/REGULATIONS

Welfare and Institutions Code Section 324.5

- (a) Whenever allegations of physical or sexual abuse of a child come to the attention of a local law enforcement agency or the local child welfare department and the child is taken into protective custody, the local law enforcement agency, or child welfare department may, as soon as practically possible, consult with a medical practitioner, who has specialized training in detecting and treating child abuse injuries and neglect, to determine whether a physical examination of the child is appropriate. If deemed appropriate, the local law enforcement agency, or the child welfare department, shall cause the child to undergo a physical examination performed by a medical practitioner who has specialized training in detecting and treating child abuse injuries and neglect, and, whenever possible, shall ensure that this examination take place within 72 hours of the time the child was taken into protective custody. In the event the allegations are made while the child is in custody, the physical examination shall be performed within 72 hours of the time the allegations were made. In the case of a petition filed pursuant to Section 319, the department shall provide the results of the physical examination to the court and to any counsel for the minor, and counsel for the parent or guardian of the minor. Failure to obtain this physical examination shall not be grounds to deny a petition under this section.
- (b) The local child welfare agency shall, whenever possible, request that additional medical examinations to determine child abuse injuries or neglect, be performed by the same medical practitioner who performed the examinations described in subdivision (a). If it is not possible to obtain additional medical examinations, the local child welfare agency shall ensure that future medical practitioners to whom the child has been referred for ongoing diagnosis and treatment have specialized training in detecting and treating child abuse injuries and neglect and have access to the child's medical records covering the current and previous incidents of child abuse.

Welfare and Institutions Code Section 1610(c)

As soon as possible, but not later than 30 days after initial placement of a child into foster care, the child protective agency shall provide the caretaker with the child's current health and education summary as described in subdivision

(a). For each subsequent placement, the child protective agency shall provide the caretaker with a current summary as described in subdivision (a) within 48 hours of the placement.

California Department of Social Services (CDSS) Manual of Policies and Procedures (MPP) Division 31-206.361

Each child in placement shall receive a medical and dental examination, preferably prior to, but not later than, 30 calendar days after placement.

RELATED POLICIES

Procedural Guide 0070-516.15, Screening and Assessing Children for Mental Health

Services and Referral to the Coordinated Services Action Team (CSAT)

Procedural Guide 0070-521.10, Assessment of Medical Neglect

Procedural Guide 0070.524.10, Assessment of Failure to Thrive

Procedural Guide 0070-525.10, Assessment of Shaken Baby Syndrome

Procedural Guide 0070-529.10, Assessing Allegations of Physical Abuse

Procedural Guide 0070-531.10, Disrobing Children

Procedural Guide 0070-532.10, Assessing Allegations of Child Sexual Abuse

Procedural Guide 0070-516.10, Assessing a Child's Development and Referring to

and Collaborating with Regional Center

Procedural Guide 0070-548.20, Taking Children into Temporary Custody

Procedural Guide 0070-570.10, Obtaining Search Warrants and/or Removal Orders

Procedural Guide 0300-303.15, Writing the Detention Report

Procedural Guide 0600-500.05, Multidisciplinary Assessment Team (MAT)

Procedural Guide 0600-500.20, Protected Health Information/Medical Information:

Access and Sharing

Procedural Guide 0600-501.09, Consent for Mental Health and/or Developmental

Assessment and Services

Procedural Guide 0600-506.10, Child Health Disability Prevention (CHDP) Program

FORM(S) REQUIRED/LOCATION

HARD COPY Medical Hub DCFS Work Flow Process

LA Kids: Medical Hub Referral Form (with Instructions)

Medical Hub Notice to Caregivers

DCFS 563, Medical Record Procedures for Foster

Caregivers

DCFS 179, Parental Consent and Authorization for Medical

Care and Release of Health and Education Records DCFS 179-MH, Parental Consent for Child's Mental Health/Developmental Assessment and Participation in

Mental Health/Developmental Services

DCFS 179 PHI, Authorization for Disclosure of Child's Protected

Health Information

DCFS 561(a), Medical Examination Form-Instructions DCFS 561(b), Dental Examination Form-Instructions DCFS 561(c), Psychological/Other Examination Form-

Instructions

CWS/CMS: Contact Notebook

Detention report

Medical Hub Referral Form

SDM: None

Medical Hubs for the Department of Children and Family Services Initial Medical Examinations and Forensic Examinations

Facility Name and Address	Hours
High Desert Health System Medical Hub 44900 N. 60 th Street West Lancaster, CA 93536	Monday – Friday 8:00 a.m. – 4:30 p.m.
(661) 945-8353 FAX (661) 945-8273	
Olive View-UCLA Medical Center Medical Hub Room 2A221 14445 Olive View Dr. Sylmar, CA 91342	Monday – Friday 8:00 a.m. – 4:30 p.m. After Hours use pediatric emergency room
(818) 364-4680 FAX (818) 364-4682	
Children's Hospital Los Angeles Foster Care Hub Foster Care Clinic 3250 Wilshire Blvd. 3 rd Floor Los Angeles, CA 90010 (323) 361-7713 (Ask for Intake) FAX (323) 361-3843	Initial Medical Exam: Monday - Friday 8:30 a.m. – 12:00p.m.
Forensic: CARES Team – Outpatient Tower, 3 rd Floor; same clinic area as Allergy Clinic 4650 Sunset Blvd., Los Ángeles, CA 90027 (323)660-2450 x 4977 FAX (323) 361-8094 Five Specialty Programs 3250 Wilshire Blvd. 5 th Floor Los Angeles, CA 90010 (323) 361-2350 FAX (323) 361-7081 a) Project Heal b) Early Childhood Feeding Program c) Victims of Crime d) School Age Clinic e) Project ABC	Monday – Friday 1:00p.m. – 5:00p.m. Monday – Friday 8:00 a.m. – 5:00p.m.

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Facility Name and Address	Hours
AC+USC Medical Center a) Forensic Medical Clinic (SCAN Clinic) LAC+USC Medical Center Outpatient Department Building 2010 Zonal Avenue, 3 rd Floor, 3P-61 Los Angeles, CA 90033	Monday – Friday 8:00 a.m. – 4:00 p.m. After Hours: (323) 226-4247 a. 24/7
(323) 226-3961 FAX (323) 226-2573 b) Community-Based Assessment and Treatment (CATC) Clinic Outpatient Department Building 2010 Zonal Avenue, 3 rd Floor, 3P-61 Los Angeles, CA 90033 (323) 226-5086 FAX (323) 226-5134 For Initial Exam.	b. Monday – Friday 8:00 a.m. – 5:00 p.m. After Hours: (323) 226-3961
Martin Luther King, Jr. Multi-service Ambulatory Care Center Medical Hub Jaron Gammons Hub Building 1721 East 120 th Street Los Angeles, CA 90059 (310) 668-6400 FAX (310) 223-0728	Monday – Friday 8:00 a.m. – 4:30 p.m. After Hours use pediatric emergency room MLK/MACC Urgent Care 4:30 p.m. – 12:00 Midnight (310) 668-4426
LAC + USC East San Gabriel Valley Satellite Hub 4024 North Durfee Avenue El Monte, CA. 91732 SCAN Tel (323) 226-3961 SCAN Fax (323) 226-2573 CATC Tel (323) 226-5086 CATC Fax (323) 226-5134	Monday – Friday 8:00 a.m. – 5:00 p.m. After Hours: (323)226-3961

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Facility Name and Address	Hours
Harbor-UCLA Medical Center a) Child Crisis Center Building N-26 1000 W. Carson Street Torrance, CA 90509 (310) 222-3567 FAX (310) 320-7849	Monday – Friday 8:00 a.m. – 5:00 p.m. After Hours use pediatric emergency room
b) K.I.D.S. Clinic Building N-26C 1000 W. Carson Street Torrance, CA 90509 (310)222-6504 FAX (310)787-0111	Monday – Friday 8:00 a.m. – 5:00 After Hours use pediatric emergency room

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